

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-----------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>MM</i> | <i>50</i> | <i>01-13-01</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|----------|
| Final Original | |
| 1 | 01030805 |
| 2 | 02061919 |
| 3 | 02030304 |
| 4 | ✓ ✓ ✓ ✓ |
| 5 | ✓ ✓ ✓ ✓ |
| 6 | ✓ ✓ ✓ ✓ |
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| Claim | Date |
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| Claim | Date |
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DESI AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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